

EXHIBIT A

Certificate of Registration



This Certificate issued under the seal of the Copyright Office in accordance with title 17, United States Code, attests that registration has been made for the work identified below. The information on this certificate has been made a part of the Copyright Office records.

Marybeth Peters

Register of Copyrights, United States of America



Short Form TX
For a Nondramatic Literary Work
UNITED STATES COPYRIGHT OFFICE

REGISTRATION NUMBER

TX 6-380-824



Effective Date of Registration

JUN 20 2006

Application Received

JUN 21 2006

Deposit Received

JUN 20 2006 Two

Fee Received

Examined By

slm

Correspondence ☐

TYPE OR PRINT IN BLACK INK. DO NOT WRITE ABOVE THIS LINE.

Title of This Work:

1

Akzidenz-Grotesk Pro Bold Condensed

Alternative title or title of larger work in which this work was published:

Name and Address of Author and Owner of the Copyright:

2

Berthold L.L.C.
47 W. Polk St. #100-310
Chicago, IL 60605 U.S.A.

Nationality or domicile:
Phone, fax, and email:

Phone (312) 493-2517
Email ip@bertholdtypes.com

Fax (866) 743-0501

Year of Creation:

3

2006

If work has been published, Date and Nation of Publication:

4

a. Date May 1 2006 (Month, day, and year all required)
Month Day Year
b. Nation U.S.A.

Type of Authorship in This Work:

5

☒ Text (includes fiction, nonfiction, poetry, computer programs, etc.)
☐ Illustrations
☐ Photographs
☐ Compilation of terms or data

Check all that this author created.

Signature:

6

Registration cannot be completed without a signature.

I certify that the statements made by me in this application are correct to the best of my knowledge.* Check one:

☐ Author ☒ Authorized agent

x Melrose M. Hunt VP + Gen. Counsel

Name and Address of Person to Contact for Rights and Permissions:

7

☒ Check here if same as #2 above.

Phone, fax, and email:

Phone ()
Email

Fax ()

8

Certificate will be mailed in window envelope to this address:

Name ▼

Berthold L.L.C.

Number/Street/Apt ▼

47 W. Polk St. #100-310

City/State/ZIP ▼

Chicago, IL 60605

Complete this space only if you currently hold a Deposit Account in the Copyright Office.

9

Deposit Account # DA92905

Name Berthold L.L.C.

DO NOT WRITE HERE

Page 1 of 1 pages

*17 U.S.C. § 506(e): Any person who knowingly makes a false representation of a material fact in the application for copyright registration provided for by section 409, or in any written statement filed in connection with the application, shall be fined not more than \$2,500.

Certificate of Registration



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Marybeth Peters

Register of Copyrights, United States of America

Short Form TX
For a Nondramatic Literary Work
UNITED STATES COPYRIGHT OFFICE

REGISTRATION NUMBER

TX 6-380-012



#TX0006380012#

Effective Date of Registration

JUN 20 2006

Application Received

JUN 20 2006

Deposit Received

One JUN 20 2006

Fee Received

Examined By

slm

Correspondence ☐

TYPE OR PRINT IN BLACK INK. DO NOT WRITE ABOVE THIS LINE.

Title of This Work:	1	Akzidenz-Grotesk Pro Light Condensed
Alternative title or title of larger work in which this work was published:		
Name and Address of Author and Owner of the Copyright:	2	Berthold L.L.C. 47 W. Polk St. #100-310 Chicago, IL 60605 U.S.A.
Nationality or domicile: Phone, fax, and email:		Phone (312) 493-2517 Fax (866) 743-0501 Email ip@bertholdtypes.com
Year of Creation:	3	2006
If work has been published, Date and Nation of Publication:	4	a. Date May 1 2006 (Month, day, and year all required) Month Day Year b. Nation U.S.A.
Type of Authorship in This Work:	5	<input checked="" type="checkbox"/> Text (includes fiction, nonfiction, poetry, computer programs, etc.) <input type="checkbox"/> Illustrations <input type="checkbox"/> Photographs <input type="checkbox"/> Compilation of terms or data
Check all that this author created.		
Signature:	6	I certify that the statements made by me in this application are correct to the best of my knowledge.* Check one: <input type="checkbox"/> Author <input checked="" type="checkbox"/> Authorized agent <i>x Melisa M. Hunt, VP + Gen. Counsel</i>
Registration cannot be completed without a signature.		
OPTIONAL Name and Address of Person to Contact for Rights and Permissions:	7	<input checked="" type="checkbox"/> Check here if same as #2 above. Phone () Fax () Email

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